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CONFIRMATION NO. 4212

<b>SERIAL NUMBER</b> 10/664,327	<b>FILING OR 371(c) DATE</b> 09/17/2003 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3762	<b>ATTORNEY DOCKET NO.</b> SSHPO101PUSA
<b>APPLICANTS</b> Edmund Schiessle, Schorndorf, GERMANY; Roland Reinhardt, Grunstadt, GERMANY; Hans-Juergen Deeg, Hembsbach, GERMANY; Friedhelm Saborowski, Lehmbader, GERMANY;				
<b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 03 010 701.5 05/13/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/09/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 15
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 22045				
<b>TITLE</b> APPARATUS AND METHOD FOR DETECTING ATRIAL FIBRILLATION				
<b>FILING FEE RECEIVED</b> 1180	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	